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**Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

20350 7590 06/07/2004

**TOWNSEND AND TOWNSEND AND CREW, LLP  
TWO EMBARCADERO CENTER  
EIGHTH FLOOR  
SAN FRANCISCO, CA 94111-3834**

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Aurora Lowell	(Depositor's name)
<i>Aurora Lowell</i>	(Signature)
August 20, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/719,181	11/20/2003	David Miller	019930-002820US	3230

TITLE OF INVENTION: SYSTEMS AND METHODS FOR OVERCOMING STITION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	09/07/2004
EXAMINER	ART UNIT		CLASS-SUBCLASS		
DOUGHERTY, THOMAS M	2834		310-309000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- 1 Townsend and Townsend and Crew LLP  
2 \_\_\_\_\_  
3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

PTS CORPORATION, a Delaware Corporation San Jose, California USA

Please check the appropriate assignee category or categories (will not be printed on the patent);  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee  
 Publication Fee  
 Advance Order - # of Copies 10

A check in the amount of the fee(s) is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 20-1430 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) Irvin E. Branch (Date) August 20, 2004  
Reg. No. 42,358

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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08/24/2004 DEMMANU2 00000077 201430 10719181  
01 FC:1501 1330.00 DA  
02 FC:1504 300.00 DA  
03 FC:8001 30.00 DA

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

		Application Number	10/719,181
		Filing Date	November 20, 2003
		First Named Inventor	Miller, David
		Art Unit	2834
		Examiner Name	Thomas M. Dougherty
Total Number of Pages in This Submission	1	Attorney Docket Number	019930-002820

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard Part B - Fee(s) Transmittal
<input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address	
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Townsend and Townsend and Crew LLP Irvin E. Branch	Reg. No. 42,358
Signature		
Date	August 20, 2004	

**CERTIFICATE OF TRANSMISSION/MAILING**

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Typed or printed name	Aurora Lowell		
Signature		Date	August 20, 2004

O I P E  
AUG 23 2004  
JCTD  
PATENT & TRADEMARK OFFICE

# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT | (\$ ) 1660

Complete if Known

Application Number	10/719,181
Filing Date	November 20, 2003
First Named Inventor	Miller, David
Examiner Name	Thomas M. Dougherty
Art Unit	2834
Attorney Docket No.	019930-002820

METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  Other  None  
 Deposit Account:

Deposit Account Number

Deposit Account Name

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) or any underpayment of fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	

SUBTOTAL (1)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Multiple Dependent	Fee from below	Fee Paid
			Extra Claims	X =
<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
			X <input type="text"/>	<input type="text"/>

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

\*\*or number previously paid, if greater; For Reissues, see above

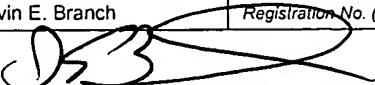
FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65			Surcharge - late filing fee or oath	
1052	50	2052	25			Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130			Non-English specification	
1812	2,520	1812	2,520			For filing a request for reexamination	
1804	920*	1804	920*			Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*			Requesting publication of SIR after Examiner action	
1251	110	2251	55			Extension for reply within first month	
1252	420	2252	210			Extension for reply within second month	
1253	950	2253	475			Extension for reply within third month	
1254	1,480	2254	740			Extension for reply within fourth month	
1255	2,010	2255	1,005			Extension for reply within fifth month	
1401	330	2401	165			Notice of Appeal	
1402	330	2402	165			Filing a brief in support of an appeal	
1403	290	2403	145			Request for oral hearing	
1451	1,510	1451	1,510			Petition to institute a public use proceeding	
1452	110	2452	55			Petition to revive – unavoidable	
1453	1,330	2453	665			Petition to revive – unintentional	
1501	1,330	2501	665			Utility issue fee (or reissue)	1330
1502	480	2502	240			Design issue fee	
1503	640	2503	320			Plant issue fee	
1460	130	1460	130			Petitions to the Commissioner	
1807	50	1807	50			Petitions related to provisional applications	
1806	180	1806	180			Submission of Information Disclosure Stmt	
8021	40	8021	40			Recording each patent assignment per property (times number of properties)	
1809	770	2809	385			Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385			For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385			Request for Continued Examination (RCE)	
1802	900	1802	900			Request for expedited examination of a design application	
						Other fee (specify) Advance Copies	30
						Publication Fee	300

\*Reduced by Basic Filing Fee Paid SUBTOTAL (3)

SUBMITTED BY

Name (Print/Type)	Irvin E. Branch	Registration No. (Attorney/Agent)	42,358	Telephone	303-571-4000
Signature				Date	August 20, 2004

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